	-:	**********************		1-1-1-1-1-1-1-1-1-1-1-1	Poem a to a collection of inform ATION RECOR	D '	pplication or 10/767,45	Docke	t Number	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							ENITIY	OR	OTHER T	T
FOR			NUMBER FILED		NUMBER EXTRA		FEE		RATE	FRE
BASIC PEE		-354	3-2-30				3 3	OR		s_77
TOTAL CLAIMS		20	20 minus 20		20 = * 0			OR	x s_0 =	
INDEPENDENT CLAIMS		ши з 2	மூர	s 3 • · · ·	• • 0			OR	x=	
M	atiple depen	DENT CLAIM PRE	SENT 07	CFR 1:16(#3)		·		OR	+=	
e If the difference in column 1 is less than more, conor "O" in column 2						IATOT		OR	TOTAL	7
		CLAIM (Column 1)	IS AS AME	NDED - PA	RT [[(Cohessa 3)	SMALL	ENTITY	OR	OTHER T	1.1 7.1 1.1.
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOI	R PRESENT LY EXTRA	RATE	ADDI- TIONAL FRE		RATE	ADDI- TIONA FEE
MO	Total	* 39	Minus	•• 20	. 19	xs =		OR	x S_18 =	342
AMENDMENT	Independent (37 CFR (.1663)	8	Minus	*** 3	= 5			OR OR	x 88	430
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 07 CPR L1449)					11-	-	OR		
		(Cokum 1)		(Column 2)	(Column 3)	TOTAL ADDIT. FEE		OR	TOTAL DOTT. FEE	772
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBEI PREVIOUS PAID FO	R PRESENT LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	addi Tiona Pes
	Total (37 CPR U4(4))		Minos	**] .s		OR	x5 <u> </u> =	
MEN	Independent pr CPR (160))		Minus	***		1		OR		
*	***********	ENTATION OF M	ULTIPLE DE	ENDENT CLA	IM (37 CFR 1.3941)			OR	, <u> </u>	
		(Column I)		(Column 2)	(Column 3)	TOTA ADDIT. FE		OR	TOTAL DOTT. FEE	
AMENDMENT C.		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBE PREVIOUS PAID FO	T R PRESENT SLY EXTRA	RATE	ADDI- TIONAL PRE		RATE	ADDI TIONA FER
	Total corcer takes		Minus	••		x \$		OR	x \$=	
	Independent (37 CFR 1.1400)		Minus	***		1		OR OR	x=	
		SENTATION OF M	ULTIPLEDE	ATD THE CHES	UM 0707 1.1800			OR	+=	
	(the entry in columns) is less than the entry in column 2, write "O" in column 3.					TOI	E .	OR	TOTAL ADDIT. FEE	

Builded Hour Statement: This form is admined to face 0.2 Hours 16 complete. Three wall VMy depending upon this states of the individual case.

Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademant.

Officer, Washington, CC 20231. DO NOT SEND FEES OR CHAPLE (2D FORMS TO THIS ADDRESS, SEND TC: Assistant Commissioners for Feering, Washington, CC 20231.

PAGE 4/21 * RCVD AT 5/20/2004 12:11:20 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/4 * DNIS:8729306 * CSID:9728945619 * DURATION (mm-ss):06-38